



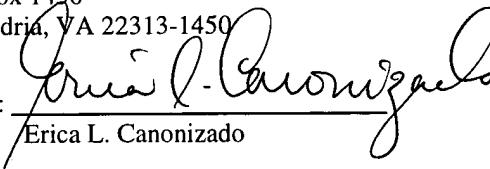
Appl. No. 10/695,110
Amendment dated May 3, 2004

Date: May 3, 2004

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Commissioner for Patents
P.O. Box 1450

Alexandria, VA 22313-1450

Signed: 
Erica L. Canonizado

Appl. No. : 10/695,110
Applicant : WANG et al.
Filed : October 28, 2003
Title : CARDIAC ABLATION SYSTEM AND METHOD FOR
TREATMENT OF CARDIAC ARRHYTHMIAS AND
TRANSMYOCARDIAL REVASCULARIZATION (as currently
amended)
TC/A.U. : 3739
Examiner : Unassigned
Docket No. : 003-008-C2

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Examiner:

Please amend the above-identified application as follows:

Amendments to the Specification are shown at page 2 of this paper.

Amendments to the Claims: None.

Amendments to the Drawings: None

Remarks/Arguments begin on page 3 of this paper.



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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

	Application Number	10/695,110	
	Filing Date	October 28, 2003	
	First Named Inventor	WANG et al.	
	Group Art Unit	3739	
	Examiner Name	Unassigned	
Total Number of Pages in this Submission	4	Attorney Docket Number	003-008-C2

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px;">Confirmation postcard</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name	Jens E. Hoekendijk, Reg. No. 37,149	
Signature		
Date	May 3, 2004	

CERTIFICATE OF MAILING OR TRANSMISSION

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Name (Print/Type)	Erica L. Canonizado	
Signature		Date
	May 3, 2004	

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